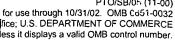
معدما	time	nlue	sian	1+1	inside	thic h	ימו

Under the Paperwork Reduction Act

PTO/SB/05 (11-00)

	U.S. Patent and	Trade
rsons are required to respond	to a collection of it	nforma





Attorney Docket No.		485772004300	o o
First Inv	rentor	Mark G. ERLANDER, et al	184
Title	BREAST CAN	CER PROGRESSION SIGNATURES	u. s. 0280
Expres	ss Mail Label No	EL 719395953 US	555

তি of the month of the control of t **CERTIFICATE OF MAILING BY "EXPRESS MAIL"**

Express	Mail	l ahel	No .	FI	71	93	95	953	115	
	iviali	Lauci	INO		, ,	33	33	コンン		ĕ

Date of Deposit: DECEMBER 21, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10 on the date indicated above and is addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231.

	RHEA AMID										
L			R								
		ICATION ELEN concerning utility pa		Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231							
See MPEP chapter 600 concerning utility patent application contents.						7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identify of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement (where there is an assignee) 11. English Translation document (if applicable) 12. Information Disclosure Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) Should be specifically itemized) 15. Certified Copy of Priority Document(s)					
6. 🗷	р	rior application, see 37	ed deleting inventor(s) named CFR 1.63(d)(2) and 1.33(b) R 1.76	1	16. Request and Certification under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other						
18. If a	CONTINUING APPL			ly the requisit	te informati	on below and in a pre	eliminary amen	dment	, or in an A _l	oplication Data Sheet	
Prior ap	37 CFR 1.76; Continuation plication information: NTINUATION OR DIVISIONAL ure of the accompanying core tently ornitted from the subm	. APPS only: The entir	application and is hereby i	plication, fron	Group /						
mauver	terray contined from the subm	atted application parts		ESPONDE	NCE AL	DRESS					
19. CORRESPONDENCE ADDRESS Or Correspondence addre 25225 PATENT TRADEMARK OFFICE									nce address below		
Mame		VANNALI ALL	ach bar code	label here)							
Name KAWAI LAU MORRISON & FOERSTER											
Address 3811 VALLEY CENTRE DRIVE - SUITE 500											
City		SAN DIEGO		State	CA		Zip	Code	92130-233	2	
Country	/	USA		Telephone	(858) 720	-5178		Fax	(858) 720-5	5125	
Name ((Print/Type)	KAWAI	LAU	1 6	Registration	1 No. 44, 461	2/	1.			
Signatu			The same				October 25, 2	001			

Under the Paperwork

FEE TRANSMITTAL FOR FY 2002

Complete if Known							
Application Number	TO BE ASSIGNED						
Filing Date	HEREWITH						
First Named Inventor	Mark G. ERLANDER, et al						
Examiner Name	TO BE ASSIGNED						
Group Art Unit	TO BE ASSIGNED						

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)475 Attorney Docket No. 485772004300

	METHOD OF PAYMENT						FEE CALCULATION (continued)									
Ţ	1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:							3. ADDITIONAL FEES								
	Deposit Account Number				5772004300		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee D	escription		Fee Paid		
١	Deposit Account Morrison & Foerster LLP															
	Account Morrison & Foerster LLP Name							130	205	65	Surcha	rge - late filing fe	e or oath			
	Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17						127	50	227	25		arge - late provisio cover sheet	onal filing			
	Applicant claims small entity status. See 37 CFR 1.27						139	130	139	130	Non-E	nglish specificatio	n			
	2. Payment Enclosed:							2,520	147	2,520		ng a request for e nination	x parte			
	□ Check		Credit C	Card 🗆	Money Orde	er 🗆 Other	112	920*	112	920*		sting publication of miner action	of SIR prior			
		<u></u>	FEE	CALC	JLATION		113	1,840*	113	1,840*		esting publication ner action	of SIR after			
1	1. BASIC	FILING	FEE				115	110	215	55		ion for reply withi				
				_			116	400	216	200	Extens month	ion for reply withi	n second			
:::	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee	117	920	217	460	month	ion for reply withi				
in the	0000	(4)	0000	(*)		Paid	118	1,440	218	720	Extens month	ion for reply withi	n fourth			
Į.	101	740	201	370	Utility filing fee	370	128	1,960	228	980		ion for reply withi	n fifth month			
냺	106	330	206	165	Design filing fee	·	119	320	219	160		of Appeal				
=	107	510	207	255	Plant filing fee		120	320	220	160		a brief in support				
=	108	740	208	370	Reissue filing fe	e	121	280	221	140		st for oral hearing n to institute a pul		 		
4	114	160	214	80	Provisional filing	fee	138	1,510	138	1,510	procee	ding				
П						(4) 070	140	110	240	55		n to revive - unaven n to revive - uninte		├──┤		
l				St	JBTOTAL (1)	(\$) 370	141	1,280	241	640	Petition	n to revive - unint	enuonai			
ı	2. EXTRA	CLAIN	I FEES				142	1,280	242	640	Utility i	ssue fee (or reiss	sue)			
1				Extra Claims	Fee from below	Fee Paid	143	460	243	230	Design	issue fee		<u> </u>		
ı	Total Claims	27	- 20** =	7	x \$9	= \$6 3	144	620	244	310	Plant is	ssue fee				
١	Independent Claims	4	- 3** =	0	x 42	= \$42	122	130	122	130	Petition	ns of the Commis	sioner			
l	Multiple Dep	endent				= \$	123	50	123	50	applica					
ı							126	180	126	180	Disclos	ssion of Informationsure Strat				
	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description		581	40	581	40	per pro		mber of			
ı	103	18	203	9	Claims in exces	s of 20	146	740	246	370	rejectio	a submission after on 'R § 1.129(a))	Пінаі			
	102	84	202	42	independent cla	ims in excess of 3	149	740	249	370	examir	ch additional invened (37 CFR § 1.1	129(b))			
	104	280	204	140	Multiple depend	ent claims, if not paid	179	740	279	370	(RCE)	st for Continued E				
	109	84	209	42	**Reissue indep original patent	endent claims over	169	900	169	900		st for expedited e sign application	xamination			
I	110	18	210	9	**Reissue claim: over original pa	s in excess of 20 and tent										
							Other fee	(specify)								
	SUBTOTAL (2) (\$)105 ** or number previously paid, if greater; For reissues, see above.						*Reduced	d by Basic F	iling Fee Pa	aid		SUBTOTAL	. (3)			
L	SUBMITTE		., , , , , , ,	J								Complete (if ap	plicable)			
f	Name (Prin			Kawai	Lau			stration No		(44,461)		Telephone	(858) 720	-5178		
ŀ	Signature				3		(Atto	rney/Agen	<u>v</u>			Date (2	121/0			
١.	oigitatute			_								-aic -	, , _	- /		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.